



SPRINGFIELD GREENE COUNTY PARK BOARD

SUMMER SHOWDOWN YOUTH BASEBALL TOURNAMENT

JUNE 11TH

(June 12th will be the rain makeup date)

DIVISIONS AND ENTRY FEES

COACH PITCH (7-9 YR OLDS) - \$135

PLAYER PITCH (9-14 YR OLDS) - \$160

REGISTRATION DEADLINE

MAY 27th, 2016

TOURNAMENT LOCATION

COOPER & EWING

AGE CUTOFF DATE IS MAY 1, 2016



- Tournament style will be determined by amount of teams entered. Each team will have a guarantee of three games.
- In order for a division to compete in tournament there must be 4 teams sign up in that age division.
- First place awards will be given in each pool. No championship games will be played to determine an overall winner.
- The Springfield-Greene County Park Board Official 2016 Youth Baseball Rules and Regulations will be used in this tournament.
- Refund requests will be accepted up to **May 27th**. Approved refunds will be charged a \$10.00 processing fee.
- If you have an individual with a disability, the Park Board requires at least one-week notice to provide individual accommodations. Please describe accommodations needed on the back of this form.
- All teams are required to fill out and turn in a roster form and waiver before their first game. Birth Certificates and photo IDs must be on site if a player's eligibility is questioned. Teams will be required to fill out a roster form and turn it in before their first game.
- An "All Tournament Pass" will be sold for \$4.00 per person (13 & older) which will give each person full access for the entire tournament. There will be NO single game passes sold during tournaments.

Please complete the information below with payment.

MAIL your entry form to:

Springfield-Greene County Park Board
Attn: Youth Community Athletics
1923 N. Weller, Springfield, MO 65803

Register in person:

Killian Sports Complex
2141 E. Pythian, Springfield, MO
(417) 837-5817

Fax registration to:

Fax to (417) 837-5829
NO Phone Registrations Will Be Accepted

Please make checks payable to: **Springfield-Greene County Park Board (SGCPB)**. MasterCard, Discover and Visa accepted. Payment must accompany form in order to complete registration. **A late fee of \$30 will be charged for late registrations after May 20th, 2016.**

COMPLETE AND DETACH THE FORM BELOW. KEEP THE UPPER PORTION FOR YOUR RECORDS.

2016 SUMMER SHOWDOWN YOUTH BASEBALL TOURNAMENT

Team Name: _____ Coach's Name: _____

Coach's Address: _____

City: _____ Zip: _____ Day Phone: _____

Alt Phone: _____ Fax: _____ Email: _____



PLEASE CIRCLE TEAM CLASS INFORMATION AND AGE GROUP THAT IS DESIRED

Team Class Information—(Please rate your team with 1 being the highest and 4 being the lowest)



*Class 1 – experienced team,

*Class 2 – semi-experienced team

*Class 3 –average team

*Class 4 – rookie team

Circle Age Division: CP 7 CP 8 CP 9 MOD 9 PP 9 PP 10 PP 11 PP 12 PP 14

Method of payment: Cash _____ Check _____ Credit Card _____ Card Number: _____

Signature: _____ Expiration Date: _____ 3 Digit Security Code _____

(FOR OFFICE USE ONLY)

Amount Paid: _____ Reference/Check Number: _____ Receipt Number: _____